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Attorney for Debtors MICHAEL KALUA CHING AND SONIA **ROMAN**

IN THE UNITED STATES BANKRUPTCY COURT

FOR THE DISTRICT OF HAWAII

In re Case No. 19-00989

MICHAEL KALUA CHING AND SONIA ROMAN

Debtors.

(Chapter 7)

AMENDED SUMMARY OF ASSETS AND LIABILITIES; AMENDED DEBTOR'S SCHEDULE F; AMENDED CREDITOR'S MATRIX

Fill in this in	ıformation to identify y	our case:		
Debtor 1	Michael	Kalua	Ching	7
Debtor 2	First Name Sonia	Middle Name	Last Name Roman	D.
(Spouse, if filing)		Middle Name	Last Name	
Case number	Bankruptcy Court - District o 19-00989	t Hawaii		
Local Forn	n H1009-1 (12/16))		
Cover	Sheet for A	<u>mendments</u>		
Part 1: Ar	mendments (attac	ch amended docur	nents to this cove	r sheet)
Check all	of the following that	are being amended.		Amendments requiring \$31 filing fee
Schedules	: A/B C]G	l —	edules: D _{XX} E/F
Statem	ent of Financial Affa	airs		ditor List – no fee required for amended list if: only updating an address or
Chapte	r 7 Statement of Inte	ention		only adding a creditor's attorney
Chapte	r 7 Statement of Cu	rrent Monthly Incom	e (122A-1)	
Chapte	r 7 Means Test Cald	culation (122A-2)		
Chapte	r 13 Statement of C	urrent Monthly Incor	ne (122C-1) and Ca	ałculation of Disposable Income (122C-2)
XX Other:	AMENDED SUMMA	RY OF ASSETS &	LIABILITIES;	AMENDED CREDITOR'S MATRIX
Part 2: De	eclaration			
and that th	ey are true and co	orrect. [If filing elec	tronically through	ead the documents filed with this declaration <i>ECF, a Declaration re: Electronic Filing with days after filing the amendments.]</i>
/s/	4. ohal C	2	151_ Do	ebtor 2 gruan
Dated: Se	ptember 13, 20	19	Date	d: <u>September 13, 2019</u>
Part 3: Ce	ertificate of Servi	ce (attach a list of	names and addre	esses where notice was sent)
The unders	signed certifies:			
list. (If exer		tion amounts have		nd parties in interest on the attached service a copy of Schedule C has been served on all
		ankruptcy Case, Mees in interest identi		rs, & Deadlines has been served on the ned service list.

Dated:

Fill in this information to identify your case:				
Debtor 1	Michael Kalua Ch	ing		
	First Name	Middle Name	Last Name	
Debtor 2	Sonia Roman			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	DISTRICT OF HAWAII		
Case number	19-00989			
(if known)				

Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct

Par	1: Summarize Your Assets		
			assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	640,200.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	15,744.66
	1c. Copy line 63, Total of all property on Schedule A/B	\$	655,944.66
Par	2: Summarize Your Liabilities		
			liabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	741,257.18
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	599,570.54
	Your total liabilities	\$	1,340,827.72
Par	3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	7,362.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	8,261.77
Par	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other so	chedules.
7.	■ Yes What kind of debt do you have?		
	- Vanadahta ana mimarih aanan mandahta Caraman dahta ana tha an 'ina madah ana indiridual mimarih ta a	norcono	l family or
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	persona	ii, iaiiiiiy, Oi

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Official Form 106Sum

page 1 of 2

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

Sonia Roman

the court with your other schedules.

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

2,338.75

\$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total cla	im
From Fait 4 on Schedule Lift, copy the following.		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

					_
Fill in this info	rmation to identify your ca	ise:			
Debtor 1	Michael Kalua Chir	na			1
	First Name	Middle Name	Last Name		
Debtor 2	Sonia Roman				
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States E	Bankruptcy Court for the:	DISTRICT OF HAWAII			
Case number	19-00989				
(if known)					■ Check if this is an
					amended filing
Official For	m 106E/E				
	E/F: Creditors Wh	a Haya Uncasur	od Claima		12/15
				D. 406	NPRIORITY claims. List the other party
left. Attach the Coname and case n		If you have no information to			number the entries in the boxes on the top of any additional pages, write your
	itors have priority unsecured				
No. Go to		ciainis against you!			
	Pail 2.				
☐ Yes.					
Part 2: List	All of Your NONPRIORITY	Unsecured Claims			
3. Do any cred	itors have nonpriority unsecu	red claims against you?			
☐ No. You h	nave nothing to report in this par	t. Submit this form to the court v	with your other sch	nedules.	
Yes.					
unsecured cl	aim, list the creditor separately for	or each claim. For each claim li	sted, identify what	type of claim it is. Do not list of	itor has more than one nonpriority laims already included in Part 1. If more claims fill out the Continuation Page of
i ait 2.					Total claim
4.1 Altres		Last 4 digits of	account number	·	\$10,993.9
•	rity Creditor's Name apiolani Boulevard	When was the o	lebt incurred?	9/24/2018	
	ulu, HI 96814	As of the date :	over file the eleim	in Charle all that apply	
	Street City State Zip Code curred the debt? Check one.	As of the date y	ou me, the claim	is: Check all that apply	
_	tor 1 only	☐ Contingent			
	tor 2 only	☐ Unliquidated			
	tor 1 and Debtor 2 only	☐ Disputed			
	ast one of the debtors and anoth	_ '	IORITY unsecure	ed claim:	
	ck if this claim is for a commu				
debt		☐ Obligations a		paration agreement or divorce t	hat you did not
	laim subject to offset?	report as priority		ing plans, and other similar del	ate
■ No		Lebis to pen	sion of profit-snar	ing pians, and other similar del	Jio

☐ Yes

■ Other. Specify Promissory Note

Debtor Debtor	Michael Kalua Ching Sonia Roman		Case number (if known) 19-00989	
4.2	American Savings Bank Nonpriority Creditor's Name	Last 4 digits of account number	7782	\$20,409.00
	P.O. Box 2300 Honolulu, HI 96804	When was the debt incurred?		
•	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
4.3	American Savings Bank Nonpriority Creditor's Name	Last 4 digits of account number	9017	\$7,456.95
	P.O. Box 2300 Honolulu, HI 96804	When was the debt incurred?	06/22/2016	
•	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
4.4	AMEX	Last 4 digits of account number	1006	\$56,883.00
	Nonpriority Creditor's Name P.O. Box 360002 Fort Lauderdale, FL 33336	When was the debt incurred?	06/01/2016	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other Specify Business I)ebt	

Debto Debto	or 1 Michael Kalua Ching or 2 Sonia Roman		Case number (if known) 19-00989	
4.5	AMEX	Last 4 digits of account number	5003	\$8,882.31
	Nonpriority Creditor's Name P.O. Box 360002 Fort Lauderdale, FL 33336	When was the debt incurred?	01/02/2002	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
4.6	Bank of Hawaii	Last 4 digits of account number	0327	\$25,259.09
	Nonpriority Creditor's Name P.O. Box 2715 Honolulu, HI 96803	When was the debt incurred?	06/15/2015	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
4.7	Bank of the West Nonpriority Creditor's Name	Last 4 digits of account number	6478	Unknown
	P.O. Box 4024	When was the debt incurred?	09/24/2001	
	Alameda, CA 94501			
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharing		
	Yes	■ Other. Specify 2016 Hurric	cane CC 19	

Debtor Debtor	Michael Kalua Ching Sonia Roman		Case number (if known) 19-00989	
4.8	Central Pacific Bank	Last 4 digits of account number	6400	\$5,948.67
	Nonpriority Creditor's Name P.O. Box 30395 Honolulu, HI 96811	When was the debt incurred?	10/21/2016	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify		
4.9	Chase Cards Nonpriority Creditor's Name	Last 4 digits of account number	5194	\$75,680.00
	P.O. Box 15298	When was the debt incurred?	05/06/2006	
	Palatine, IL 60094 Number Street City State Zip Code	As of the date you file, the claim	in Charle all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim	в. Спеск ан тат арргу	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify Business I	Debt	
4.1	Chase Cards	Last 4 digits of account number	3069	\$13,207.15
	Nonpriority Creditor's Name P.O. Box 15298 Palatine, IL 60094	When was the debt incurred?	11/01/2004	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharir	og plane, and other similar debte	
	■ No		ig pians, and other similar debts	
	Yes	Other. Specify		

Debtor Debtor	1 Michael Kalua Ching 2 Sonia Roman		Case number (if known) 19-00989	
4.1	Citi Cards	Last 4 digits of account number	6045	\$5,014.00
	Nonpriority Creditor's Name P.O. Box 8034 South Hackensack, NJ 07606	When was the debt incurred?	02/24/2010	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
4.1	Citicards	Last 4 digits of account number	5138	\$51,480.00
	Nonpriority Creditor's Name			. ,
	P.O. Box 8034	When was the debt incurred?	09/08/2006	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	,,,,,		
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt	Obligations arising out of a sepa	aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Business I	Debt	
4.1	Costco Visa	Last 4 digits of account number	3425	\$123,946.40
3	Nonpriority Creditor's Name			V 120,010110
	P.O. Box 78019	When was the debt incurred?	01/02/2014	
	Phoenix, AZ 85062 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 2 only Debtor 1 and Debtor 2 only	_ `		
	☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecure	d claim:	
		Student loans		
	☐ Check if this claim is for a community debt	_	aration agreement or divorce that you did not	
		conganone anomy out of a sope		

■ No

☐ Yes

report as priority claims

Is the claim subject to offset?

■ Other. Specify Business Debt

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

Debto Debto	Michael Kalua Ching Sonia Roman		Case number (if known) 19-00989	
4.1	Department of Human Services	Last 4 digits of account number	4558	\$2,059.00
	Nonpriority Creditor's Name FMO/Accounting/CRS P.O. Box 4147	When was the debt incurred?	July 2019	
	Honolulu, HI 96812-4147 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	<u></u>	☐ Student loans		
	☐ Check if this claim is for a community debt Is the claim subject to offset?		aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharir	ng plans, and other similar debts	
	Yes	Other. Specify		
4.1 5	Discover Card	Last 4 digits of account number	8831	\$38,613.00
	Nonpriority Creditor's Name P.O. Box 30395 Salt Lake City, UT 84130	When was the debt incurred?	02/25/1999	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	■ Other. Specify Business I	Debt	
4.1	Discover Card	Last 4 digits of account number	8278	\$15,892.17
	Nonpriority Creditor's Name P.O. Box 30395 Solt Lake City LLT 84130	When was the debt incurred?	08/03/2007	
	Salt Lake City, UT 84130 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
		Student loans		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	<u></u>	aration agreement or divorce that you did not	

Official Form 106 E/F

■ No

☐ Yes

Schedule E/F: Creditors Who Have Unsecured Claims

Other. Specify

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

Debtor Debtor	1 Michael Kalua Ching 2 Sonia Roman	Case number (if known) 19-00989	
4.1	Hawaii Receivables Managament	Last 4 digits of account number	\$132,209.20
	Nonpriority Creditor's Name 970 N. Kalaheo Avenue, Suite C110 Kailua HI 96734	When was the debt incurred?	
	Kailua, HI 96734 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	■ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Business Debt	
4.1	MB Financial Services	Last 4 digits of account number 2001	\$5,636.65
	Nonpriority Creditor's Name P.O. Box 961	When was the debt incurred?	
	Roanoke, TX 76262		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Vehicle Lease: 2015 MB C300W	
4.1	Yett Property Management	Last 4 digits of account number	Unknown
	Nonpriority Creditor's Name		
	c/o Denis Lee, Esq.	When was the debt incurred?	
	1164 Bishop Street, Suite #1201 Honolulu, HI 96813		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	

Part 3: List Others to Be Notified About a Debt That You Already Listed

 \square Obligations arising out of a separation agreement or divorce that you did not

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify Personal Guarantee of Business Lease

Official Form 106 E/F

debt

■ No

☐ Yes

Schedule E/F: Creditors Who Have Unsecured Claims

report as priority claims

Page 7 of 8

Is the claim subject to offset?

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Case number (if known)

19-00989

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

					Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total					
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ ——	0.00
	6d.			· -	
	ou.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
					Total Claim
	6f.	Student loans	6f.	\$	0.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	599,570.54
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	599,570.54

Fill in this information to identify your case:								
Debtor 1	Michael Kalua Ching							
	First Name	Middle Name	Last Name					
Debtor 2	Sonia Roman							
(Spouse if, filing)	First Name	Middle Name	Last Name					
United States Bankruptcy Court for the:		DISTRICT OF HAWAII						
Case number	19-00989							
(if known)								

Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

	Sign Below		
Did y	ou pay or agree to pay someone who is NO	Γ an attorney to help	you fill out bankruptcy forms?
	No		
	Yes. Name of person		Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
	r penalty of perjury, I declare that I have read ney are true and correct.	I the summary and s	chedules filed with this declaration and
X /s	s/ Michael Kalua Ching	x	/s/ Sonia Roman
M	lichael Kalua Ching		Sonia Roman
S	ignature of Debtor 1		Signature of Debtor 2
D	ate September 13, 2019		Date September 13, 2019

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

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Best Case Bankruptcy

United States Bankruptcy Court District of Hawaii

In re	Michael Kalua Ching Sonia Roman		Case No.	19-00989		
	Coma Noman	Debtor(s) Chap		7		
	VEDIEICAT	ION OF CREDITOR MATE		IDED		
	VERIFICAL	ION OF CREDITOR MATE	(IX - AWIEN	DED		
Γhe ab	ove-named Debtors hereby verify the	at the attached list of creditors is true and	correct to the best	of their knowledge.		
Dotor	Santombor 12, 2010	/c/ Michael Kalua China				
Date:	September 13, 2019	Michael Kalua Ching Michael Kalua Ching	/s/ Michael Kalua Ching Michael Kalua Ching			
		Signature of Debtor				
Date:	September 13, 2019	/s/ Sonia Roman	/s/ Sonia Roman			
		Sonia Roman				

Signature of Debtor

Altres 967 Kapiolani Boulevard Honolulu, HI 96814

American Savings Bank 1001 Bishop Street Honolulu, HI 96813

American Savings Bank P.O. Box 2300 Honolulu, HI 96804

AMEX

P.O. Box 360002 Fort Lauderdale, FL 33336

Bank of Hawaii P.O. Box 2715 Honolulu, HI 96803

Bank of the West P.O. Box 4024 Alameda, CA 94501

Central Pacific Bank P.O. Box 30395 Honolulu, HI 96811

Chase Cards P.O. Box 15298 Palatine, IL 60094

Citicards P.O. Box 8034 South Hackensack, NJ 07606

Costco Visa P.O. Box 78019 Phoenix, AZ 85062

Department of Human Services FMO/Accounting/CRS P.O. Box 4147 Honolulu, HI 96812-4147

Discover Card P.O. Box 30395 Salt Lake City, UT 84130

First Foundation Bank Two Waterfront Plaza 500 Ala Moana Blvd., #2A Honolulu, HI 96813 Hawaii Gourmet Cookies, Inc. 91-110 Hanua Street, #313 Kapolei, HI 96707

Hawaii Receivables Managament 970 N. Kalaheo Avenue, Suite C110 Kailua, HI 96734

MB Financial Services P.O. Box 961 Roanoke, TX 76262

Office of Hawaiian Affairs 560 N. Nimitz Hwy., #200 Honolulu, HI 96817

Wells Fargo Home Mortgage P.O. Box 51120 Los Angeles, CA 90051

Yett Property Management c/o Denis Lee, Esq. 1164 Bishop Street, Suite #1201 Honolulu, HI 96813